

APPENDIX G

Interpretation of First Aid for Certain Types of Injuries⁺

1. Cuts and lacerations. First aid treatment is limited to cleaning of the wound, soaking, application of antiseptic or nonprescription medication, and bandaging on the first visit. Follow-up visits are limited to observation, including changing of the dressing and bandage. Additional cleaning and application of antiseptic are permissible as first aid where required by work duties that are likely to soil the bandage. Application of butterfly closures, for cosmetic purposes only, can be considered first aid.
2. Abrasions. Same as for cuts and lacerations except that ointments can be added on follow-up visits to prevent drying and cracking of the skin.
3. Bruises. First aid is limited to a single soaking or application of cold compresses on a minor bruise. Follow-up visits are limited only to observation.
4. Splinters and puncture wounds. First aid is limited to cleaning of the wound, removal of a foreign object(s) by tweezers or other simple techniques, application of antiseptics and nonprescription medications, and bandaging on the first visit. Follow-up visits are limited to observation, including changing of the bandage. Additional cleaning and application of antiseptic are permissible as first aid where required by work duties that are likely to soil the bandage.
5. Burns, Thermal and Chemical (Resulting in destruction of tissue by direct contact). First aid is limited to cleaning or flushing of the surface; soaking; application of cold compresses, antiseptics, or nonprescription medications; and bandaging on the first visit. Follow-up visits are restricted to observation, changing of bandages, or additional cleaning. Most first-degree burns are amenable to first aid treatment.
6. Sprains and strains. First aid treatment is limited to soaking, application of cold compresses, and the use of elastic bandage on the first visit. Follow-up visits are for observation, possibly including reapplying a bandage.
7. Eye injuries. First aid is limited to irrigation, removal of foreign material not embedded in the eye, and application of

⁺ Adapted from ANSI Z16.4, American National Standard for Uniform Recordkeeping for Occupational Injuries and Illnesses.

USACE Supplement 1
to AR 385-40
30 Mar 90

nonprescription medications. A precautionary visit (special examination) to a doctor is still considered first aid if treatment is limited to the aforementioned items. Follow-up visits are for observation only.

8. Inhalation of toxic or corrosive gases. First aid is limited to removal of the employee to fresh air or the one-time administration of oxygen for several minutes.